



PTO/SB/17 (01-06)

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Effective 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)**FEE TRANSMITTAL**
For FY 2006**Complete if Known**

Application Number	10/773,320
Filing Date	February 9, 2004
First Named Inventor	FELIX HENRY
Examiner Name	Jeffery A. Brier
Art Unit	2672
Attorney Docket No.	01807.101404

☐ Applicant claims small entity status. See 37 C.F.R. 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 0.00**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 06-1205	Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto		
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<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
40	- 20 or HP = 0	x 0 = 0				
HP = highest number of total claims paid for, if greater than 20						
					0	0

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	- 3 or HP = 0	x 0 = 0	
HP = highest number of independent claims paid for, if greater than 3			

3. APPLICATION SIZE FEE

If the specification, drawings, and any Preliminary Amendment exceed 100 sheets of paper in total, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/ 50 =	(round up to a whole number) x	=

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other:	

SUBMITTED BY		
Signature		Registration No. (Attorney/Agent) 33,628
Name (Print/Type)	Mark A. Williamson	Telephone 212-218-2100
		Date: February 28, 2006

MJD:MAW:eyw

DC_MAIN 232449v1

01807.101404



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: Jeffery A. Brier
FELIX HENRY)	
	:	Group Art Unit: 2672
Appln. No.: 10/773,320)	
	:	Confirmation No.: 6653
Filed: February 9, 2004)	
	:	
For: NAVIGATION CONTROL IN AN)	February 28, 2006
IMAGE HAVING ZOOMABLE AREAS	:	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND SUBMISSION OF REPLACEMENT DRAWINGS

Sir:

Introductory Comments

In response to the Official Action mailed November 28, 2005, the Examiner is requested to amend the above-identified application as follows.